

Received 4:00pm 11/3/2011

FOR INSTRUCTIONS, SEE BACK OF FORM

## DISCLOSURE SUMMARY PAGE

File with:  
Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup>, Ste. 1A  
Des Moines, Iowa 50319  
Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.  
Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

IA ETHICS AND  
CAMPAIGN DISCLOSURE BD.

2011 NOV -4 AM 7:51

Reset Form

COMMITTEE NAME (Must be same as on Statement of Organization)

Barb Malone Committee

IMPORTANT: Indicate by # type of committee you are reporting for: ☐

( 1 ) Statewide/Legislative/Judge Standing for Retention Candidate ( 2 ) State PAC ( 3 ) State Party  
( 4 ) County Central Committee ( 5 ) County Candidate ( 6 ) City Candidate ( 7 ) School Board or Other Political  
Subdivision Candidate ( 8 ) County PAC ( 9 ) City PAC ( 10 ) School Board or Other Political Subdivision PAC ( 11 ) Local Ballot Issue

### CANDIDATE COMMITTEES ONLY:

Candidate Name

Barb Malone

Political Party (if applicable)

Office Sought

District (if Senate or House)

FORM

DR-2

(Rev. 12/2009)

DISCLOSURE  
REPORT

For Office Use Only

Comm. #

14078

Logged In

Scanned

BW

Computer

Audited

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

Barb Malone

SIGNATURE OF PERSON FILING REPORT

265-1424

TELEPHONE

Nov 3, 2011

DATE SIGNED

I AM FILING A 11/3/2011 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

(report date)

Indicate by # ☐

☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

11/5/2011  
County & Local Committees, enter County in  
which Election is held

Polk

### STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.) \$

#### ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below) .....

Schedule F: Loans Received total (Attach Schedule F) .....

Schedule H: Total Sales of Campaign Property (Attach Schedule H) .....

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL..... \$

#### SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below) .....

Schedule F: Loan Repayments total (Attach Schedule F) .....

CASH ON HAND at the end of this reporting period (if final report balance must be zero) ..... \$

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D) ..... \$

\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) ..... \$

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F) ..... \$

CONSULTANT BREAKDOWN (Schedule G Attached?) \_\_\_\_\_ YES \_\_\_\_\_ NO

### CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

721.63

COMMITTEE NAME (Must be same as on Statement of Organization)

Barb Malone Committee

Reset Form

SCHEDULE

E

(Rev. 06/97)

IN-KIND  
CONTRIBUTIONS☐ CHECK THIS BOX IF  
AMENDING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
9-15-11	Barb Malone 4809 Ash Dr Pleasant Hill, Ia 50327	Self	Yard Signs	\$ 482.30	<input type="checkbox"/>
9-20-11	"	"	Printer Ink Paper	47.98	<input type="checkbox"/>
9-24-11	"	"	Printer Ink Staples	86.27	<input type="checkbox"/>
9-24-11	"	"	Printed Flyers	25.00	<input type="checkbox"/>
9-15-11	Keith + Loretta Greiner 421 N. Pleasant Hill Blvd Pleasant Hill, Ia 50327	Friend	Printed Handouts	15.58	<input type="checkbox"/>
9-20-11	"	"	Printed Handouts	52.91	<input type="checkbox"/>
9-20-11	"	"	Door Magnets	5.60	<input type="checkbox"/>
10-21-11	Stan Glawe 5061 Cooper Creek Dr Pleasant Hill, Ia 50327	Contributor	<del>Printer Ink</del> Printed Handouts	5.99	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL

\$

721.63

TOTAL (if last  
page of this  
schedule)

\$

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page \_\_\_\_\_ of \_\_\_\_\_  
(for Schedule E)